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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *TV NONE*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *TV NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR  COUNTRY MI	SHEETS  DRAWING 3	TOTAL  CLAIMS <i>20 18</i>	INDEPENDENT  CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials _____				

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TITLE  
Method of anti-blinding for active night vision system

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